

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: _____		2 Serial/Patent # <u>09 068,935</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED							
<input checked="" type="checkbox"/>	Filing		05/26/98							
<input type="checkbox"/>	Amendment		\$							
<input type="checkbox"/>	Extension of Time		\$							
<input type="checkbox"/>	Notice of Appeal/Appeal		\$							
<input type="checkbox"/>	Petition		\$							
<input type="checkbox"/>	Issue		\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$							
<input type="checkbox"/>	Maintenance		\$							
<input type="checkbox"/>	Assignment		\$							
			05/26/98							
			\$ 825							
		7 TOTAL AMOUNT OF REFUND								
		\$ 1,185								
		8 TO BE REFUNDED BY:								
		Treasury Check								
		Credit Deposit A/C #:								
		9 <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">5</td> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">--</td> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">4</td> <td style="width: 20px; text-align: center;">1</td> <td style="width: 20px; text-align: center;">7</td> </tr> </table>		5	0	--	0	4	1	7
5	0	--	0	4	1	7				
10 REASON:										
<input checked="" type="checkbox"/>	Overpayment									
<input type="checkbox"/>	Duplicate Payment									
<input type="checkbox"/>	No Fee Due (Explanation):									
<p><i>- Small entity status</i></p>										
11 REFUND REQUESTED BY: <i>Attorney</i>										
TYPED/PRINTED NAME: <i>Yichelle Richardson</i>		TITLE: <i>SLIE</i>								
SIGNATURE: <i>[Signature]</i>		PHONE: <i>308-3152</i>								
OFFICE: <i>TC1600</i>										

THIS SPACE RESERVED FOR FINANCE USE ONLY:										
APPROVED: <i>[Signature]</i>		DATE: <i>4/21/99</i>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**